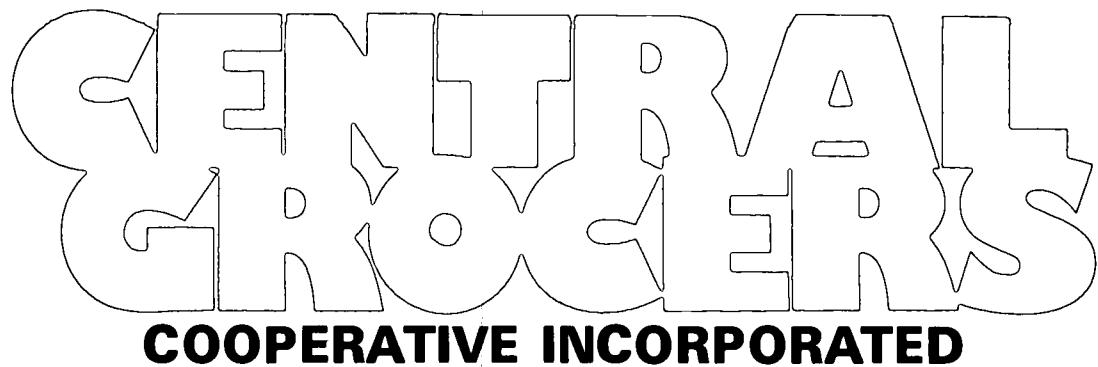


## **EXHIBIT A**



(390 OR - 309)

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## APPLICATION

STORE NUMBER 309  
DATE 8/9/91

I hereby make application for membership with **Central Grocers Coop Inc.** and in doing so, I enclose a certified check in the amount of \$ 500.00. This check is to cover the cash deposit requirement as established by the Board of Directors of **Central Grocers Coop Inc.** and also the purchase of five (5) shares of capital stock at \$100.00 par value each.

REDACTED

Check Type of Organization

Corporation  Partnership \_\_\_\_\_ Single-owner \_\_\_\_\_

State in which Incorporated ILL. CORP. # 100483

Trading Name of Store

BERKOT'S SUPER FOODS  
BERKOT FOODS

Address of Store

2000 S WOLF RD

Zip Code

MOKENA IL  
CITY STATE  
60448 WILL  
ZIP COUNTY

Phone Number at Store

708-479-7411

Names and Home Addresses of ALL Corporate Officers,  
Partners or owners:

NAME	ADDRESS	TITLE	PER-CENT OWNED
<u>JOHN KOTARA</u>	<u>18804 MEADOWVIEW DR. MOKENA</u>	<u>PRES.</u>	<u>.50</u>
<u>DOMENIC BERNARDI</u>	<u>3403-169TH ST. MOKENA</u>	<u>SEC.</u>	<u>.50</u>

Name of Principle Officer or Partner JOHN KOTARA

Home Address 18804 Meadowview DR. Mokena IL 60458

Home Phone Number 708 479 7020

Name and Address of Accountants: HANCOCK & CO.  
16800 Chicago Ave P.O Box 357 Lansing IL 60438

Size of Building:

Selling Area 16000 sq. ft.

Check one: Own Building  Lease Building \_\_\_\_\_

Parking Area (number of cars) 75

**STORE INFORMATION:**

Business Telephone Number(s) 208-479-7401

Store Manager: JOHN KOTARA

Requested Delivery Days: Grocery TUE + FRI. (10:00 AM TO 11:00 NOON)

Frozen MON + THUR. (EARLY AM 8:00)

Produce ~~TUES WED THUR~~

MON + WED + FRI (EARLY AM 8:00)

Check The Following Programs You Wish To Participate In:

- Insurance
- Case Labels
- Cart Deliveries
- Window Posters
- Sales Analysis
- MSI Ordering System

In addition to the above I (we) do hereby agree to deposit with the Corporation, a sum equal to TWO TIMES my (our) average weekly purchases . . . thus entitling me (us) to one week's credit; and to deposit additional sums of money from time to time, as and when my (our) weekly purchases increase, so as to maintain the ratio of TWO TIMES my (our) weekly purchases.

I (we) agree to add to my (our) initial cash deposit \$ \_\_\_\_\_ weekly, this amount to appear as a charge on my (our) weekly statement and to continue until such time as my (our) deposit is equal to TWO TIMES weekly purchases.

**EXAMPLE:**

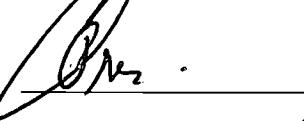
Weekly Purchases: \$10,000.00  
Deposit Requirement: \$20,000.00

It is also understood, the ownership of this membership, entitles me (us) to participate in any patronage rebates of **CENTRAL GROCERS COOPERATIVE, INC.** based on my (our) purchases made during life of this membership, according to the By-Laws of said company. Any rebates earned shall be subject without process of law, to being set off or applied at any time against any indebtedness owed by the member stockholder to the Corporation.

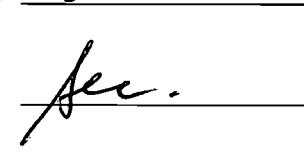
Applicant hereby signs and submits this application for membership in **Central Grocers Coop Inc.** as of the date inserted below having thoroughly reviewed the Cooperatives By-Laws and Rules and Regulations. Applicant agrees to comply with and be bound by the By-Laws and Rules and Regulations of **Central Grocers Coop Inc.** as currently in effect and as the same may be amended hereafter.

DATE 8-9-91

SIGNED 

TITLE 

SIGNED 

TITLE 

**Approval:**

Representative \_\_\_\_\_  
Cartage/Whse. \_\_\_\_\_  
Accounting \_\_\_\_\_  
Board \_\_\_\_\_

**- OFFICE USE ONLY -**

- Insurance
- Case Labels
- Cart Delivery
- Window Posters
- Sales Analysis
- MSI Ordering System

**SPECIAL INSTRUCTIONS**

Accounting Dept. \_\_\_\_\_  
Shipping Dept. \_\_\_\_\_



CENTRAL GROCERS, INC.

## MEMBERSHIP APPLICATION



Member



Patron



Customer

Store No.: F 317

Date: 7/23/19

SUBMIT MEMBERSHIP APPLICATION TO: **CENTRAL GROCERS, INC.**  
**11100 BELMONT AVENUE**  
**FRANKLIN PARK, ILLINOIS 60131**

**MEMBERSHIP APPLICATION**

We are pleased that you are interested in Central Grocers, Inc. becoming your primary supplier. In order to assist us in the consideration of your membership application, you will need to provide *all* the following information about your Company (Applicant), its organizational structure and other items requested in this application. Note that your failure to provide any information requested in this application or any information provided by you that cannot be verified may result in a delay in processing or a decline of your application. Please answer the following items:

1. Please state the full and correct name of your Company/store as registered with the Illinois Secretary of State and any other State in which your Company is qualified to do business:

Mom Kot, Ltd

2. Check the type of entity of applicant:

Corporation     LLC     Partnership     Sole proprietorship  
REDACTED

3. Provide your Federal Employer's Identification Number

4. Provide your State Business (sales tax) Number(s) IL

W  
IN

5. State any trade names or "doing business names", whether or not registered with the Secretary of State, that your Company uses and/or owns:

Berkot's Super Foods

6. (a.) The Company or the agent (completing this application) is affiliated with or has an ownership interest in the following (including affiliates and subsidiaries):

Name and Address	Type of Operation	Ownership Percentage or Relationship
_____	_____	_____
_____	_____	_____
_____	_____	_____

- (b.) The Company is owned by the following:

Name and Address	Type of Operation	Ownership Percentage or Relationship
Dikot, Ltd	SuperMarket	10%
_____	_____	_____
_____	_____	_____

7. (a). Our principal place of business and the location at which the Company maintains its accounting books and records is:

20005 Wolf Rd Mokena IL 60448  
Street Address 708.479.7411 City 708.479.8777 State

Phone Number

Fax Number

- (b). The Company has other places of business and/or maintains inventory or other collateral at the following addresses:

159 Stirling Place Mokena IL 60954  
Street Address City State/Country

Street Address City State/Country

Street Address City State/Country

8. Provide the following information with respect to the store that you wish to receive deliveries:

Store Name: Berkof's SuperFood's

Street Address: 159 Stirling Place Mokena IL 60954  
Street Address City State Zip

Store Phone Number: 815.472.2669

Store Contact Person: Luke Kofara

Size of Store retail selling area: 15000 14,150 square feet

Parking Area (no. of parking spaces): \_\_\_\_\_ spaces

Check one:  Own building  Lease Building

- Check the following information with respect to the store that you wish to receive deliveries:

- Custom Pricing
- Update Shelf Labels (No Price)
- Update Shelf Labels (with Price)
- Chicago Custom Labels

9. Please provide the following information (if additional space is needed, please attach a separate sheet).

(a.) Board of Directors

Full Name	Title	Home Address	Ownership %
John Kofara	Director	19400 Hunter Tr Mokena IL	-0-
Luke Kofara	Director	24221 S. Indiana Tr Manhattan	50%
Rene Evans	Director	19822 Wilshire Tr Mokena	25%
	Director		
	Director		

Above reflects ownership of  
Parent Co. Dikof, Ltd

(b.) Company Officers/LLC Managers

Full Name	Title	Home Address	Ownership %
John Kotara	PRES	Some	
Lake Kotara	V.P.	Some	50%
Rene Ewanik	Secy /Treas		50%

10. Prompt written notice will be given to Central Grocers, Inc. of any change or amendment with respect to any of the information provided in this application. Until such notice is received by you, Central Grocers, Inc. shall be entitled to rely upon the foregoing in all respects. \_\_\_\_\_ (please initial)

11. Please ATTACH all the following documents of Company to this application:

- \* Articles of Incorporation (or Articles of Organization)
- \* Certificate of Good Standing
- \* Bank Resolutions
- ✓ \* FEIN information
- \* Shareholder Agreement re: voting rights

\*\*\*\*\*  
This represents an application for membership in Central Grocers, Inc.'s cooperative by the undersigned Company, by and through its authorized agent. If approved by Central Grocers, Inc., this application shall represent Company's membership agreement with the cooperative. In addition to the above, the Company does hereby agree to deposit with Central Grocers, Inc. a sum equal to TWO TIMES (2x) store's average weekly purchases, thus entitling the member to one week's credit. Furthermore, the member agrees to deposit additional sums of money from time to time as and when Company's weekly purchases increase or when balances become due, thereby maintaining the ratio of TWO TIMES (2x) its weekly purchases. If approved, Applicant agrees to pay all weekly statements by Thursday of the following week.

The member agrees that if this application for membership is approved, the Company's membership shall entitle the Company to participate in any patronage rebates of Central Grocers, Inc. based on the Company's purchases made during the term of the membership subject to the rules, policies, regulations, and by-laws of Central Grocers, Inc. Any rebates earned shall be subject to, without process of law, being set off or applied at any time against any indebtedness owed by the Company, authorized agent, affiliates of the Company or member stockholder of the Company. If the Company is approved as a "Customer", the Customer will not be entitled to participate in any patronage rebate programs of Central Grocers, Inc.

Company, by and through its authorized agent, hereby signs and submits this application for membership in Central Grocers, Inc. As of the date executed below, having thoroughly reviewed the Central Grocers, Inc.'s rules, policies, regulations, and by-laws, upon approval of membership, the member further agrees to strictly comply with and be bound by the cooperative rules, policies, regulations, and by-laws as currently in effect and as may be amended from time to time hereinafter. The applicant certifies that all information provided herein is true and accurate.

APPLICANT COMPANY

Munkot, Ltd

✓ By:

Its: President

John will  
fax signed

Page

S:\0001-250\250\Membership Application.new.doc



**Central Grocers, Inc.**

## **Membership Application**



**Member**



**Patron**

**Store Number:** 321

**Name:** Watsekot, Ltd. d/b/a Berkots Super Foods

**Date:** Nov 26, 2013

**Submit Membership Application To: Central Grocers, Inc.**  
2600 W. Haven Ave.  
Joliet, IL 60433

**Membership Application**

We are pleased that you are interested in Central Grocers, Inc. becoming your primary supplier. In order to assist us in the consideration of your membership application, you will need to provide all the following information about your Company (Applicant), its organizational structure and other items requested in this application. Note that your failure to provide any information requested in this application or any information provided by you that cannot be verified may result in a delay in processing or a decline of your application. Please answer the following items:

1. Please state the full and correct name of your Company/Store as registered with the Illinois Secretary of State and any other State in which you Company is qualified to do business.

Watsekot, Ltd.

2. Check the type of entity of applicant:

Corporation       LLC       Partnership       Sole Proprietorship

REDACTED

3. Provide Federal Employer's Identification (FEIN)

4. Provide your State Business (sales tax) Number(s)

VVI \_\_\_\_\_

IN \_\_\_\_\_

Other \_\_\_\_\_

5. State any trade names or "doing business names", whether or not registered with the Secretary of Stat. that you Company uses and /or owns:

Berkots Super Foods

6. (A.) The Company or agent (completing this application) is affiliated with or has an ownership interest in the following (including affiliates and subsidiaries):

<u>Name &amp; Address</u>	<u>Type of Operation</u>	<u>Ownership % or Relationship</u>
---------------------------	--------------------------	------------------------------------

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

- (B.) The Company is owned by the following:

<u>Name &amp; Address</u>	<u>Type of Operation</u>	<u>Ownership % or Relationship</u>
---------------------------	--------------------------	------------------------------------

Dikot Ltd.      Parent Company      100%

\_\_\_\_\_

\_\_\_\_\_

7. (A.) Our principal place of business & the location at which the Company maintains its accounting books & records is:

<u>11333 W. 159th St.</u>	<u>Orland Park</u>	<u>IL</u>	<u>60467</u>
Street Address	City	State	
<u>708-675-7567</u>	<u>708-675-7390</u>	<u>Courtroe@hotmail.com</u>	
Phone Number	Fax Number	Email Address	

(B.) The Company has other places of business and/or maintains inventory or other collateral at the following address:

Street Address	City	State/Country
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Street Address	City	State/Country
----------------	------	---------------

Street Address	City	State/Country
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8. Provide the following information with respect to the store that you wish to receive deliveries:

Store Name: Watsekot, Ltd. d/b/a Berkots Super Foods

Street Address: 1152 E. Walnut St. Watseka IL 60970

Store Phone Number: 815-432-0902

Store Contact Person: Dave Phyzbyla

Size of Store Retail selling area: \_\_\_\_\_ Square Feet

Parking Area (# of parking spaces): \_\_\_\_\_ Spaces

Check One:        Own Building X Lease Building

9. Please provide the following information (if additional space is needed, please attach a separate sheet).

(A.) Board of Directors

Full Name	Title	Home Address	Ownership %
	Director		

(B.) Company Officers/LLC Managers

Full Name	Title	Home Address	Ownership %
John Kotara	President	19400 Hunter Trail Dr. Mokena, IL 60448	Ø
Lucas Kotara	VP	12549 Surrey Ct. Mokena, IL 60448	

10. Prompt written notice will be given to Central Grocers, Inc. of any change or amendment with respect to any of the information provided in this application. Until such notice is received by you, Central Grocers, Inc. shall be entitled to rely upon the foregoing in all respects.  (please initial)

11. Please ATTACH all the following documents of Company to this application:

- \*Articles of Incorporation (or Articles of Organization)
- \*Certificate of Good Standing
- \*FEIN Information

\*\*\*\*\*

This represents an application for membership in Central Grocers, Inc.'s cooperative by the undersigned Company, by and through its authorized agent. If approved by Central Grocers, the Applicant shall deposit with Central Grocers a sum equal to TWO TIMES (2x) the store's average weekly purchases, thus entitling the member to two week's credit. Furthermore, the member agrees to deposit additional sums of money from time to time as and when Company's weekly purchases increase or when balances become due, thereby maintaining the ratio of TWO TIMES (2x) its weekly purchases. If approved, Applicant agrees to pay all weekly statements when due each Thursday via ACH payment. Upon termination from buying, the deposit is fully refundable to Applicant after all store statement balances are paid in full.

The Applicant agrees that if this application for membership is approved, the Company's membership shall entitle the Company to participate in any patronage rebates of Central Grocers based on the Company's purchases made during the term of the membership subject to the rules, policies, regulation, & by-laws of Central Grocers, Inc. Any rebates earned shall be subject to, without process of law, being set off or applied at any time against any indebtedness owed by the Company, authorized agent, affiliates of the Company or member stockholder of the Company. If the Company is approved as a "Customer", the Customer will not be entitled to participate in any patronage rebate programs of Central Grocers, Inc.

Company, by and through its authorized agent, hereby signs and submits this application for membership in Central Grocers, Inc. As of the date executed below, having thoroughly reviewed the Central Grocers, Inc.'s rules, policies, regulations, and by-laws, upon approval of membership, the member further agrees to strictly comply with and be bound by the cooperative rules, policies, regulations, and by-laws as currently in effect and as may be amended from time to time hereinafter. The Applicant certifies that all information provided herein is true and accurate.

APPLICANT:

Name: Watse Kot, Ltd. db/a Berkots Super Foods

By: Courtney Roe

Its: Accounting Supervisor



**Central Grocers, Inc.**

## **Membership Application**



**Member**



**Patron**

**Store Number:** 325

**Name:** Aromakot Ltd DBA BERKOT'S Super Foods

**Date:** 3/17/14

**Submit Membership Application To: Central Grocers, Inc.**  
**2600 W. Haven Ave.**  
**Joliet, IL 60433**

**Membership Application**

We are pleased that you are interested in Central Grocers, Inc. becoming your primary supplier. In order to assist us in the consideration of your membership application, you will need to provide all the following information about your Company (Applicant), its organizational structure and other items requested in this application. Note that your failure to provide any information requested in this application or any information provided by you that cannot be verified may result in a delay in processing or a decline of your application. Please answer the following items:

1. Please state the full and correct name of your Company/Store as registered with the Illinois Secretary of State and any other State in which your Company is qualified to do business.

AromaKut, Ltd.

2. Check the type of entity of applicant:

Corporation       LLC       Partnership       Sole Proprietorship

3. Provide Federal Employer's Identification (FEIN):

REDACTED

4. Provide your State Business (sales tax) Number(s):

VVI \_\_\_\_\_

IN \_\_\_\_\_

Other \_\_\_\_\_

5. State any trade names or "doing business names", whether or not registered with the Secretary of Stat. that you Company uses and /or owns:

BERIKOTS Super Food

6. (A.) The Company or agent (completing this application) is affiliated with or has an ownership interest in the following (including affiliates and subsidiaries):

<u>Name &amp; Address</u>	<u>Type of Operation</u>	<u>Ownership % or Relationship</u>
---------------------------	--------------------------	------------------------------------

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- (B.) The Company is owned by the following:

<u>Name &amp; Address</u>	<u>Type of Operation</u>	<u>Ownership % or Relationship</u>
---------------------------	--------------------------	------------------------------------

Dikot, Ltd.      Parent Co.      100%  
\_\_\_\_\_  
\_\_\_\_\_

7. (A.) Our principal place of business & the location at which the Company maintains its accounting books & records is:

<u>11333 W. 159<sup>th</sup> St</u>	<u>Orland Park</u>	<u>IL</u>	<u>60467</u>
Street Address	City	State	
<u>(708) 675-7567</u>	<u>(708) 675-7390</u>	<u>Courtney.Roe@BERKOT.NET</u>	
Phone Number	Fax Number	Email Address	

(B.) The Company has other places of business and/or maintains inventory or other collateral at the following address:

Street Address	City	State/Country
----------------	------	---------------

Street Address	City	State/Country
----------------	------	---------------

Street Address	City	State/Country
----------------	------	---------------

8. Provide the following information with respect to the store that you wish to receive deliveries:

Store Name: BERKOT's Super Foods

Street Address: 200 S. Bridge St Aroma Park IL 60910

Store Phone Number: 815-933-4131 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Store Contact Person: TBD.

Size of Store Retail selling area: \_\_\_\_\_ Square Feet

Parking Area (# of parking spaces): \_\_\_\_\_ Spaces

Check One:    Own Building X Lease Building

9. Please provide the following information (if additional space is needed, please attach a separate sheet).

(A.) Board of Directors

Full Name	Title	Home Address	Ownership %
	Director		

(B.) Company Officers/LLC Managers

Full Name	Title	Home Address	Ownership %
John Kotara	President	19400 Hunter trail Dr. Mokena IL 60448	○
LUKE Kotara	V P	12549 Surrey ct. Mokena IL 60448	○

10. Prompt written notice will be given to Central Grocers, Inc. of any change or amendment with respect to any of the information provided in this application. Until such notice is received by you, Central Grocers, Inc. shall be entitled to rely upon the foregoing in all respects. M(please initial)

11. Please ATTACH all the following documents of Company to this application:

- \*Articles of Incorporation (or Articles of Organization)
- \*Certificate of Good Standing
- \*FEIN Information

\*\*\*\*\*

This represents an application for membership in Central Grocers, Inc.'s cooperative by the undersigned Company, by and through its authorized agent. If approved by Central Grocers, the Applicant shall deposit with Central Grocers a sum equal to TWO TIMES (2x) the store's average weekly purchases, thus entitling the member to two week's credit. Furthermore, the member agrees to deposit additional sums of money from time to time as and when Company's weekly purchases increase or when balances become due, thereby maintaining the ratio of TWO TIMES (2x) its weekly purchases. If approved, Applicant agrees to pay all weekly statements when due each Thursday via ACH payment. Upon termination from buying, the deposit is fully refundable to Applicant after all store statement balances are paid in full.

The Applicant agrees that if this application for membership is approved, the Company's membership shall entitle the Company to participate in any patronage rebates of Central Grocers based on the Company's purchases made during the term of the membership subject to the rules, policies, regulation, & by-laws of Central Grocers, Inc. Any rebates earned shall be subject to, without process of law, being set off or applied at any time against any indebtedness owed by the Company, authorized agent, affiliates of the Company or member stockholder of the Company. If the Company is approved as a "Customer", the Customer will not be entitled to participate in any patronage rebate programs of Central Grocers, Inc.

Company, by and through its authorized agent, hereby signs and submits this application for membership in Central Grocers, Inc. As of the date executed below, having thoroughly reviewed the Central Grocers, Inc.'s rules, polices, regulations, and by-laws, upon approval of membership, the member further agrees to strictly comply with and be bound by the cooperative rules, policies, regulations, and by-laws as currently in effect and as may be amended from time to time hereinafter. The Applicant certifies that all information provided herein is true and accurate.

APPLICANT:

Name: Aroma Kot, LTD. DBA Berkot's Super Foods

By: Derrick Cannon

Its: C. M.